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CONFIRMATION NO. 5366

SERIAL NUMBER 10/529,798	FILING OR 371(c) DATE 10/28/2005 RULE	CLASS 623	GROUP ART UNIT 3731	ATTORNEY DOCKET NO. 5660-01207
APPLICANTS Luis F Angel, San Antonio, TX;				
** CONTINUING DATA ***** This application is a 371 of PCT/US03/30844 09/30/2003 which claims benefit of 60/414,770 09/30/2002				
** FOREIGN APPLICATIONS ***** <div style="text-align: center;">** SMALL ENTITY **</div>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY TX	SHEETS DRAWING 4	TOTAL CLAIMS 26
				INDEPENDENT CLAIMS 3
ADDRESS 35690				
TITLE Stent delivery system and method of use				
FILING FEE RECEIVED 465	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	